PTO/SB/06 (8-96)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE eduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. ATENT APPLICATION FEE DETERMINATION RECORD Docket No: 51373-0009 Serial No.: 10/707,290 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY **SMALL ENTITY** (Column 2) (Column 1) **FOR** NUMBER FILED NUMBER EXTRA **RATE** FEE RATE FEE BASIC FEE andre Andre September 1985 0 0 OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = 0 0 0 x \$ 25= OR x \$ 50 =(37 CFR 1.16(c)) INDEPENDENT CLAIMS 0 minus 3 = x <u>100</u>= OR  $x_{200}=$ 0 0 (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0 0 OR 0 **TOTAL** 0 TOTAL \* If the difference in column 1 is less then zero, enter "0" in column 2 OR CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY **SMALL ENTITY** (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **NUMBER** PRESENT RATE TIONAL **RATE** TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total OR x \$<u> 5</u>0 = 0 28 Minus 28 = n 0 x \$<u>25</u>= (37 CFR 1.16(c)) OR Independent 3 Minus 3 0 100= 0 0 200= (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 0 0 OR TOTAL 0 OR 0 ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI- $\mathbf{\omega}$ REMAINING **NUMBER** PRESENT **RATE TIONAL** TIONAL **RATE AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total \*\* \$ 25= 0 0 Minus = 0 x \$ 50 = OR Independent 0 200 = Minus ٥  $_{\rm X}$  100 =0 (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 0 OR TOTAL TOTAL 0 0 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL **RATE** TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total OR \*\* 0 0 x \$<u>25</u> = Minus 0 s \$<u>50</u> = OR Independent <u> 200</u> = Minus 0 100 = 0 0 (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 0 OR TOTAL TOTAL OR 0 0 \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT, FEE \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".